# Comprehensive Financial Assurance Report

Report run on: August 11, 2010 1:31 PM Version: 5.0

### **User Selection Criteria**

**Location:** COLORADO **Type of Date Range:** None Chosen

**County:** None Chosen

State District: None Chosen Sort Order: BY MECHANISM

**Handler Name:** 

**Handler ID:** 

Group of ID's: None Chosen

Financial Assurance Type: None Chosen

Mechanism Type: None Chosen

Display Current or All: DISPLAY ALL MECHANISMS AND COST ESTIMATES

Agency Type: None Chosen

Include Notes: Yes

### Results

Data meeting the criteria you selected follows.

### Total Pages 7 Total Handler Count 9

# **Report Description**

This report wil provide a comprehensive view of all financial assurance information based on the user selection criteria.

# **Report Information**

Name: fa\_comprehensive\_mech.rdf

Developed by: EPA Headquarters, Office of Resource Conservation and Recovery

Deployed: December 2008 Last Revised: August 2010

Contact: rcrainfo.help@epa.gov

Tables Used: hreport\_univ5, hid\_groups, fcost\_estimate4, fmechanism4, fmechanism\_detail4, fln\_cost\_mechanism\_detail4, lu\_mechanism\_type,

lu\_state

Libraries: none

#### List of Handler Universe Abbreviations

**GPRA CA 2020** 

Generator Indicates that the facility is a Large Quantity Generator (LQG), Small Quantity Generator (SQG), Conditionally Exempt Small Quantity Generator (CEG), or not a generator (N). Transporter Indicates that the facility Transports waste subject to RCRA regulations. ('Y' indicates that the facility is in this universe). Operating TSDF Indicates that the facility is a Treatment, Storage or Disposal facility subject to any type of enforcement. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment) IC / EC in Place Indicates that the facility has Institutional Controls / Engineering Controls in place. ('Y' indicates that the facility is in the respective universe). El Indicator (HE/GW) Indicates that the facility has controls in place for Environmental Indicators. HE - Human Exposures ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control; 'N' indicates the exposure does not exist) GW - Groundwater Release ('+' indicates the exposure exists and is under control: '-' indicates the exposure exists and is not under control: 'N' indicates the exposure does not exist) Perm Prgrs Indicates that the facility is part of the Permitting/Closure/Post-Closure Progress universe. It then specifies the type of facility: (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment). Indicates that the facility is part of the Permit Workload universe. It then specifies the type of facility: PermWrkld (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment). Clos Wrkld Indicates that the facility is part of the Closure Workload universe. It then specifies the type of facility: (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment). Pclos Wrkld Indicates that the facility is part of the Post-Closure Workload universe. It then specifies the type of facility: (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment). Renewals Wrkld Indicates that the facility is part of the Permit Renewals Workload universe. It then specifies the type of facility: (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment). Indicates that the facility is part of the GPRA Permit universe. ('+' indicates that the facility is on the GPRA Permit Baseline and meeting the **GPRA Permit** goal; '-' indicates that the facility is on the GPRA Permit Baseline and not meeting the goal; 'N' indicates that the facility is not on the GPRA Permit Baseline). **GPRA Renewals** Indicates that the facility is part of the GPRA Renewals universe. ('+' indicates that the facility is on the GPRA Renewals Baseline and meeting the goal; '-' indicates that the facility is on the GPRA Renewals Baseline and not meeting the goal; 'N' indicates that the facility is not on the GPRA Renewals Baseline). Subj CA Indicates that the facility is part of the Subject to Corrective Action universe. ('Y' indicates that the facility is in this universe). Subj CA TSD 3004 Indicates that the facility is a Treatment, Storage or Disposal facility Potentially Subject to Corrective Action Under 3004(u)/(v). ('Y' indicates that the facility is in this universe). Subj CA TSD Discr Indicates that the facility is a Treatment, Storage or Disposal facility Subject to Corrective Action Under Discretionary Authorities. ('Y' indicates that the facility is in this universe). Subj CA Non-TSD Indicates that the facility is a Non-Treatment, Storage or Disposal facility where Corrective Action has been imposed. ("Y" indicates that the facility is in this universe). CA Wrkld Indicates that the facility is part of the Corrective Action Workload universe. ('Y' indicates that the facility is in this universe).

Indicates that the facility is part of the GPRA Corrective Action universe ('Y' indicates that the facility is in this universe).

	** This report may contain sensitive info	ormation. **	
ARVADA TREATMENT CENTER LLC	County Name / Code:	JEFFERSON / CO059	COR00006874
Location: 5500 B FENTON ST, UNIT B, ARVADA, CO 80001 Mailing: 616 W MONUMENT ST, COLORADO SPRINGS, C	O 80905		Region 08
Activity Location: CO State District:	Non-Notifier:	Extract: Y	Active: Y
Generator: LQG Transporter: Y	Operating TSDF:S-	IC / EC In Place: N	El Indicator (HE / GW): + / +
Perm Prgrs:S- Pclos Wrkld:	Subj CA: Y	Subj CA Non-TSD: N	GPRA CA 2020: Y
Perm Wrkld:S- Renewals Wrkld:	Subj CA TSD 3004: Y	CA Wrkld: N	GPRA Permit: +
Clos Wrkld:  Mechanism Seq: 1 Agency: S - STATE Type: L - LET	Subj CA TSD Discr: N		GPRA Renewals: -
Provider: THE BANK AT BROADMOOR	TER OF CREDIT	Contact:	Phone:
Detail Seq ID	Agency Effective Date	Expiration Date Face Value Amou	
1 012408	S - STATE 01/24/2008	\$28,582.	
<b>NOTES:</b> loc expires 01/24/2010		<del></del>	
2 Jul 2009	S - STATE 07/06/2009	\$29,210.	81
Cost Estimate Seq Agency Date	•	al Assurance Type	Reason
1 S - STATE 01/24/2008	\$28,582.00 CO - COMNE C - CLO	SURE	R - REVISED COST ESTIMATE
Mechanism Seq: 2 Agency: S - STATE Type: I - INSL	RANCE		
Provider: ENVIRONMENTAL		Contact: COWEST OF COLORADO SI	PRINGS <b>Phone</b> : 719 473-3390
Detail Seq ID  1 FSP6108631	Agency         Effective Date           S - STATE         08/22/2008	Expiration Date Face Value Amou 08/22/2009 \$2,000,000.	
		<del>+=,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	
Cost Estimate Seq Agency Date 2 S - STATE	•	al Assurance Type DEN THIRD-PARTY LIABILITY	Reason
2 3-3IAIE	\$2,000,000.00 CO - COIVINE S - SOD	DEN I HIRD-PARTT LIABILITY	
CLEAN HARBORS DEER TRAIL LLC	County Name / Code:	ADAMS / CO001	COD991300484
Location: 108555 E HWY 36, DEER TRAIL, CO 80105			Region 08
Mailing: 108555 E HWY 36, DEER TRAIL, CO 80105			
Activity Location: CO State District:	Non-Notifier:	Extract: Y	Active: Y
Generator: LQG Transporter: N	Operating TSDF: LS-	IC / EC In Place: N	El Indicator (HE / GW): + / +
Perm Prgrs: LST Pclos Wrkld: L	Subj CA: Y	Subj CA Non-TSD: N	GPRA CA 2020: Y
Perm Wrkld: LS- Renewals Wrkld:	Subj CA TSD 3004: Y	CA Wrkld: N	GPRA Permit: +
Clos Wrkld:	Subj CA TSD Discr: N		GPRA Renewals: -
Mechanism Seq: 1 Agency: S - STATE Type: I - INSU Provider: STEADFAST INSURANCE COMPANY	RANCE	Contact: CHRIS DELAUDER	<b>Phone</b> : 6175708870
	A		
Detail Seq ID  1 ENC5254333-02	Agency         Effective Date           S - STATE         09/06/2006	Expiration Date Face Value Amou 09/06/2009 \$10,173,310.	
NOTES: Closure and post closure. CA cost not applicable	3 3.7.1.2 33,30,2000	ψ10,170,010.	
Cost Estimate Seq Agency Date	Amount Resp Person Financia	al Assurance Type	Reason
	· · · · · · · · · · · · · · · · · · ·		A INCLATION AD ILIOTED
1 S - STATE 09/01/2008	\$5,173,469.00 CO - COMNE P - POS	T-CLOSURE CARE	A - INFLATION ADJUSTED

\*\* This report may contain sensitive information. \*\*

				**	This report	may con	itain sens	sitive inf	ormation. **				
CLEAN HARBOR	RS DEE	R TRAIL LL	C - continue	d								COD99	91300484
Mechanism Seq: 2	Ą	gency: S - STA	Type:	I - INSUR	ANCE								
Provide	r: STEA	DFAST INSUR	ANCE COMPAN	ΙΥ					Contact: CH	IRIS DELAUDEF	₹	Phone: (617)5	70-8870
	Sudden a	and Non-Sudder	n Liability										
Detail Seq ID	07.40000					ency		ve Date	Expiration Date		alue Amount		
	3743936				8-8	STATE	11/01	/2008	11/01/2009	\$1	6,000,000.00		
NOTES: Liability re		•				D D .		<b>-</b> :	-! A <b>T</b>		_		
Cost Estimate	Seq 3	Agency S - STATE	Date	Φ.	Amount 16,000,000.00	Resp Pe			al Assurance Type DEN & NON-SUDDE	N TUIDD DADT		leason	
AREA UNIT NOT			M Non-sudden	Ψ	10,000,000.00		VIINE	B - 30D	DEN & NON-SUDDE	N INIKU PAKI	T LIABILITY		
DENVER-ARAPA	HOE CI	HEM WAST	E PROCESS	FAC		C	County Nan	ne / Code:	: ARAPAHOE / CO00	5		COD00	0695007
		VE, AURORA	A, CO 80014 D, GREENWO	OD VILLA	GE. CO 801 <sup>2</sup>	11						R	egion 08
Activity Location: CO		•	ate District:			Non-N	otifier:		Ex	tract:	Υ	Active:	Υ
Generator: N			ansporter:	N			ting TSDF:		-	,	N	El Indicator (HE / GW)	): +/+
Perm Prgrs: LT			los Wrkld:	L		Subj C		Υ		ıbj CA Non-TSD	: N	GPRA CA 2020:	Υ
Perm Wrkld:		Re	newals Wrkld:			•	A TSD 300		CA	A Wrkld:	N	GPRA Permit:	+
Clos Wrkld:						Subj C	A TSD Dis	cr: N				GPRA Renewals:	+
Mechanism Seq: 1	•	gency: S - STA	ATE Type:	I - INSUR	ANCE				_				
Provide	r: CBI								Contact:			Phone:	
Detail Seq ID	05/00/00					ency	Effective		Expiration Date	Face Va	alue Amount		
1 CBI- NOTES: Confident	05/26/20		Claire ad		8-8	STATE	01/01	/1992	06/01/2010		\$1.00		
Cost Estimate	Seq	Agency	Date		A	Resp Pe		Financi	al Assurance Type				
COSt Estimate	<u> Эец</u> 1	S - STATE	05/26/2009			CO - CON			T-CLOSURE CARE			leason - INFLATION ADJUSTED	
AREA UNIT NOT	•			mation	Ψ1.00		VIIVE	1 -1 00	T-CLOSONE CANE			- INI EATION ADJUSTED	
E.I. DUPONT DE	NEMOL	JRS & CO II	NC LOUVIER	S		C	County Nan	ne / Code:	: DOUGLAS / CO035			CODO	7060981
	,	LOUVIERS, C										R	egion 08
Activity Location: CO		Sta	ate District:	R		Non-N	otifier:		Ex	tract:	Υ	Active:	Υ
Generator: SQG			ansporter:	N			ting TSDF:		-		N	El Indicator (HE / GW)	): _/_
Perm Prgrs: LST			los Wrkld:	L		Subj C		Υ		ıbj CA Non-TSD		GPRA CA 2020:	Υ
Perm Wrkld:		Re	newals Wrkld:			•	A TSD 300		CA	A Wrkld:	Υ	GPRA Permit:	+
Clos Wrkld: LST					====	Subj C	A TSD Dis	cr: N				GPRA Renewals:	N
Mechanism Seq: 1  Provide		gency: S - STA OU PONT DE NI	ATE <b>Type:</b> Emours and (		CIAL TEST				Contact: NA	NCY SANDELL		<b>Phone:</b> (302)7	74-4406
Detail Seq ID		0101112211		301111 7 H 4 1		ency	Effectiv	ve Date	Expiration Date		alue Amount	1 110110: (552).	
	9 TEST					STATE	03/25		03/31/2010		0,000,000.00		
Cost Estimate	Seq	Agency	Date		Amount	Resp Pe			al Assurance Type	***	· · ·	leason	
	1	S - STATE		9	\$8,000,000.00				DEN & NON-SUDDE	N THIRD PART			
	2	S - STATE	03/25/2009	Ì	\$432,000.00			C - CLO				- INFLATION ADJUSTED	
	3	S - STATE	03/25/2009		\$19,000.00				T-CLOSURE CARE			- INFLATION ADJUSTED	
		<b>-</b>			,						,,		

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EVRAZ ROCKY MOUNT	AIN STEEL				Cou	unty Name / Code:	PUEBLO / CO101			COD00	7057961
Location: 2100 S FREEW Mailing: PO BOX 316, P										Re	egion 08
Activity Location: CO	Sta	te District:			Non-Noti	fier:	Ext	ract:	Υ	Active:	Υ
Generator: LQG Perm Prgrs: LT Perm Wrkld: Clos Wrkld:	Pcl	nsporter: os Wrkld: newals Wrkld:	N L		•		Sub	bj CA Non-TSD:	Y N Y	El Indicator (HE / GW): GPRA CA 2020: GPRA Permit: GPRA Renewals:	: +/+ Y + N
Mechanism Seq: 1 A	gency: S - STA	TE Type:	L - LETT	ER OF CREDIT	-						
Provider: UBS	AG						Contact: WA	LTER ARNOLD		Phone: 212821	6753
Detail Seq ID					ency	Effective Date	Expiration Date		lue Amount		
1 20100113 NOTES: LOC number confi	idential			5-5	TATE	01/13/2010		\$2	2,088,260.00		
Cost Estimate Seq	Agency	Date		Amount			I Assurance Type			Reason	
1	S - STATE	06/08/2010		\$1,780,723.00	CO - COAY	J A - CORI	RECTIVE ACTION		Α	- INFLATION ADJUSTED	
AREA UNIT NOTES: CA 2 AREA UNIT NOTES: PO	S - STATE	06/09/2010		\$274,733.00	CO - COAY	J P - POST	T-CLOSURE CARE		Д	- INFLATION ADJUSTED	
KOPPERS INC					Cou	unty Name / Code:	ADAMS / CO001			COD00	7077175
Location: 465 W 56TH AV Mailing: 465 W 56TH AV						,					gion 08
Activity Location: CO		te District:			Non-Noti	fier:	Ext	ract:	Υ	Active:	Υ
Generator: LQG Perm Prgrs: LS-		insporter: os Wrkld:	N L		Operating Subj CA:			/ EC In Place: bj CA Non-TSD:		El Indicator (HE / GW): GPRA CA 2020:	: +/+ Y
Perm Wrkld:	Rei	newals Wrkld:			•	TSD 3004: Y	CA	Wrkld:	Υ	GPRA Permit:	+
Clos Wrkld:S-  Mechanism Seq: 1  A	gency: S - STA	TE <b>T</b>	LINCLIE	DANIOE	Subj CA	TSD Discr: N				GPRA Renewals:	-
Provider: GRE	-	• • • • • • • • • • • • • • • • • • • •	I - INSUF NY	KANCE			Contact: MAF	RCH USA		Phone:	
Detail Seq ID					ency	Effective Date	Expiration Date		lue Amount		
1 PEC0016880 NOTES: Sudden and NonS				S - S	TATE	07/19/2008	07/19/2009	\$8	3,000,000.00		
Cost Estimate Seg	Agency	Date		Amount	Resp Pers	on Financia	Il Assurance Type			Reason	
1	S - STATE	Date		\$8,000,000.00			DEN & NON-SUDDEN	N THIRD PARTY		icason .	
2	S - STATE	06/01/2009		\$1,838,000.00			RECTIVE ACTION			R - REVISED COST ESTIMAT	E
AREA UNIT NOTES: PO Mechanism Seq: 2	Permit gency: S-STA	TE Type:	I - INSUF	DANCE							
Provider: VES	TUR INSURANC	• •	I - INSUR	KANCE			Contact:			Phone:	
NOTES: Policy is  Detail Seq ID	CBI			A	2001	Effective Data	Evnirotion Dota	F V-	lua Amazoni		
1 CBI BEAZER				S - S	e <b>ncy</b> TATE	08/04/1998	Expiration Date 01/01/2013		lue Amount 3,000,000.00		
NOTES: Current Face Valu			ning cove								
Cost Estimate Seq	Agency S - STATE	<b>Date</b> 06/01/2009		\$1,838,000.00	Resp Pers		Il Assurance Type RECTIVE ACTION			<b>Reason</b> R - REVISED COST ESTIMAT	·E
	3-SIAIE	00/01/2009		φ1,030,000.00	CO - COMIN	E A-CORI	RECTIVE ACTION		, r	- KENISED COST ESTIMAT	

\*\* This report may contain sensitive information. \*\*

				** T	his report	may conta	ain sensi	tive inf	ormation. **					
KOPPERS INC -													COD	007077175
	Agender: BANK OF it LOC is CBI	e <b>y</b> : S - STAT AMERICA	ГЕ Туре:	L - LETTER (	OF CREDIT				Contact:				Phone:	
Detail Seq ID					Age	ncy	Effective	Date	Expiration Dat	e Fa	ace Value A	mount		
1 CBI NOTES: All update	I -BANK OF AN es to this LOC				S - S	TATE	06/29/2	007				\$1.00		
Cost Estimate	Seq /	Agency	Date		Amount	Resp Per	son	Financi	al Assurance Typ	е		Reaso	n	
AREA UNIT NO	TES: Contain	-	02/10/2009 vill be closed un 02/10/2009	der site wide		ction		C - CLO		_			FLATION ADJUSTED	
AREA UNIT NO		- STATE Impoundme		. ,	138,322.00 e corrective		NE	P - POS	T-CLOSURE CAR	E 		A - INF	FLATION ADJUSTED	
ROCKWOOL PL	ANT - PUE	BLO				Co	ounty Name	e / Code:	PUEBLO / CO101	<u> </u>			CODO	73405961
			LO, CO 8100 68, CHARLO		270									Region 08
Activity Location: CC	)	Stat	e District:			Non-No	tifier:			Extract:	Υ		Active:	Υ
Generator: N Perm Prgrs: L Perm Wrkld: Clos Wrkld:		Pclo	nsporter: s Wrkld: ewals Wrkld:	N L		Subj CA Subj CA	ng TSDF: A: A TSD 3004 A TSD Discr			IC / EC In Pl Subj CA Non CA Wrkld:			El Indicator (HE / GV GPRA CA 2020: GPRA Permit: GPRA Renewals:	V): +/+ Y - N
NOTES	er: NONE : Abandoned F	ey: S - STATacility - In Po	• • • • • • • • • • • • • • • • • • • •	N - NO MECI					Contact:				Phone:	
Detail Seq ID 1 NO NOTES: Abandon	NE	closura CA	550 on 12/16/20	nn2	Age S - S	TATE	12/16/2		Expiration Dat 12/16/2032	e Fa	ace Value A	\$0.02		
Cost Estimate		Agency	Date	J02	Amount	Resp Per	son	Financi	al Assurance Typ	<u> </u>		Reaso	n	
AREA UNIT NO	1 S	- STATE	11/24/1998	EPA R8 emer	\$0.02	CO - COW	/AV	A - COR	RECTIVE ACTION				BMITTED NOT APPR	ROVED
NOTES: No co	2 S ost estimate or	- STATE FA Mecanis	12/16/2002			co - cow			T-CLOSURE CAR	E		I - INIT	TAL COST ESTIMATE	E
THORO PRODUC	стѕ со					Co	ounty Name	e / Code:	JEFFERSON / CO	D059			CODO	007065576
	MBER CT, G X 504, ARVA												ı	Region 08
Activity Location: CC	)	Stat	e District:	R		Non-No	tifier:			Extract:	Υ		Active:	Y
Generator: N Perm Prgrs:ST Perm Wrkld:		Pclo	nsporter: s Wrkld:	N 		Subj CA	ng TSDF: A: A TSD 3004	Y		IC / EC In Pl Subj CA Non CA Wrkld:	-TSD: N		El Indicator (HE / GV GPRA CA 2020: GPRA Permit:	Ń
Clos Wrkld:ST		Ken	ewals Wrkld:			•	TSD 3004 TSD Discr			CA WIKID:	N		GPRA Permit: GPRA Renewals:	N N

\*\* This report may contain sensitive information. \*\*

THORO PRODUCTS	CO - continue	d							COD00	0706557
Mechanism Seq: 1	Agency: S - STA	Type: T - TF	RUST FUND (FULL	Y FUNDED)	)					
Provider: JP	MORGAN CHASE	BANK, N.A.				Contact:	DAWN HALL		Phone: 24873	84304
NOTES: TRUS	T DECREASING I	N VALUE DUE TO TR	UST FEES AND LC	W INTERES	ST ACCUMULA	TION.				
Detail Seq ID				ency	Effective Date	Expiration Dat	e Face Va	alue Amount		
1 01141983			S - S	TATE	04/13/2010			\$34,771.47		
NOTES: ID IS TRUST SI										
Cost Estimate Sec	<u> </u>	Date		Resp Pers		ncial Assurance Typ	9		eason	
NOTES: Last known		01/10/1992 stment. Permit Denied, ocky Flats Industrial Sit				LOSURE		A	- INFLATION ADJUSTED	
WESTERN SLOPE RA		•		Со	ounty Name / Co	de: MESA / CO077			COD98	377465
	AND 50 #2 , FRL Γ , CANANDAIG	JITA, CO 81521-207 UA, NY 14424	70						R	egion (
Activity Location: CO	Sta	te District:		Non-Not	tifier:		Extract:	Υ	Active:	Υ
Senerator: CEG	Tra	ansporter: N		Operatin	ng TSDF:	=	IC / EC In Place:	N	El Indicator (HE / GW	): _/_
erm Prgrs:S-		os Wrkld:		Subj CA	0		Subj CA Non-TSD:	N	GPRA CA 2020:	N
erm Wrkld:	Re	newals Wrkld:		Subj CA	TSD 3004: N		CA Wrkld:	Υ	GPRA Permit:	Ν
Clos Wrkld:S-				Subj CA	TSD Discr: Y				GPRA Renewals:	N
lechanism Seq: 1	Agency: S - STA	Type: X - S	TANDBY TRUST FU	JND						
Provider: HS	BBC BANK USA NA	4				Contact:	LISA J PRICE		Phone:	
Detail Seq ID			Age	ency	Effective Date	Expiration Dat	e Face Va	alue Amount		
1 04232008			S - S	TATE	04/23/2008			\$0.00		
Cost Estimate Sec	q Agency	Date	Amount	Resp Pers	son Fina	ncial Assurance Typ	9	R	eason	
	2 S - STATE	03/18/2008	\$4,000,000.00	CO - COM	NE C-C	LOSURE		R	- REVISED COST ESTIMA	TE
	Liability for regulate	ed units from Western 3701, 98060501, 060103	Slope Refining Com 301, and 08043001	npany. Tank			order 08043001.			
Mechanism Seq: 2	Agency: S - STA		ETTER OF CREDIT							
	BBC BANK USA NA	4				Contact:	LISA J PRICE		Phone:	
Detail Seq ID				ency	Effective Date	Expiration Dat		alue Amount		
1 18APR200			S - S	TATE	04/18/2008		\$5,000	0,000,000.00		
NOTES: PER ORDER LI										
Cost Estimate Sec		Date		Resp Pers		ncial Assurance Type	9		eason	
NOTES: Per Order 0 AREA UNIT NOTES:	Liability for regulate		Slope Refining Com	closure and	d corrective action		order 08043001.	R	- REVISED COST ESTIMA	TE

<sup>\*</sup> End of Report \*